



PATIENT

Kit Kat Hargraves

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Spayed Female

AGE

20 years

WEIGHT

9.28 lbs

INTERPRETED BY

Eric Lindquist, DMV,
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Jenna Walsh, CVT

HOSPITAL NAME

Santa Clara AH

REFERRING VET

Dr. Brasted-Maki

DATE

7/7/22

Invoice
31527

PRESENTING CLINICAL SIGNS

This is a very geriatric patient with a history of hyperthyroidism and chronic renal disease. On routine follow up for these conditions a month ago, patient was found to have a small abdominal mass. Slight weight loss was also seen. On repeat examination the mass has gotten slightly larger. Patient is in stable clinical condition and has gained a little weight. She vomits rarely. She has a picky appetite which pre-dates the detection of the mass. Current Medications Methimazole, Gabapentin Radiographic Findings Abdominal radiographs (right lateral and VD): Area of loss of detail in mid abdomen, approximately the area where I suspect a mass. Mass is not definitively visible. Primary Question/Differential to Be Answered in This Exam Further work up for abdominal mass

Abnormal PE/Chem/CBC/UA Results: BBM: 06-03-22 at 5:20p: (Mini hyperthyroid panel) Blood count: Hgb is slightly low at 10.0; MCH is slightly low at 12.0 Chem: Kidney values are similar to last time checked: BUN increase from 34 to 44, but creat is unchanged at 1.8 and SDMA improved from 15 to 13 T4 is low normal at 0.8

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder**, trigone, and pelvic urethra presented normal thicknesses and normal tone. The ureters were not visible which is normal. No uroliths or sediment were visualized and anechoic urine was present. No evidence of inflammatory or neoplastic changes was noted. Ureteral papillae were normal.

The **kidneys** presented a relatively uniform cortical hyperechogenicity when compared to the renal medulla, spleen and liver. No overt masses were noted. Corticomedullary definition was nebulous and the ratio favored the cortex slightly. The ureters were not visible and assumed to be normal. These changes are most consistent with chronic interstitial nephritis yet infiltrative disease could not be entirely ruled out without biopsy though neoplasia is not suspected. Non-obstructive mineralization was noted. The left kidney measured 3.34 cm. The right kidney measured 3.21 cm.

Adrenal Glands

Both **adrenal glands** were visualized and recognized as having normal shape, size, position and echogenicity for this breed. The phrenic vasculature, glandular echogenicity and detail were unremarkable. Capsule, cortex, and medullary definition were normal for this age patient. The right adrenal gland measured 0.43 cm. The left adrenal gland measured 0.43 cm.

Spleen

The **spleen** in this patient was uniform, yet volume contracted. Hydration status should be assessed.

Liver

The **liver** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some age-related parenchymal remodeling was noted but likely not clinically significant at this time. The right liver revealed a hypoechoic, mildly disruptive 1.3 x 1.07 cm



PATIENT

Kit Kat Hargraves

nodule. Vascular and biliary tracts were of normal volume and no evidence of congestion was noted. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal. No pathological hepatic lymphadenopathy was evident

SPECIES

Feline

Gastrointestinal

BREED

Domestic Shorthair

Retention of ingesta was noted in the **stomach**. The midabdomen revealed an intestinal mass that measured 3.5 cm with pericapsular inflammatory pattern. The mass appears to be partially obstructive as it has an annular appearance. Wall thickness measured up to 1.2 cm. The intestinal mass appeared to be jejunal likely causing a prerenal effect.

SEX

Spayed Female

Pancreas

AGE

20 years

The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Some parenchymal remodeling, however, with mild deviation from curvilinear normalcy was observed. Pancreatic duct and capsular irregularities were present consistent with age related changes. If pain upon imaging (+ Murphy sign) was present or if the patient is focally painful in subxiphoid palpation then low-grade smoldering chronic pancreatitis should be suspected.

WEIGHT

9.28 lbs

ULTRASONOGRAPHIC FINDINGS

Obstructive, annular jejunal mass. Lymphoma is likely.

Liver nodule. Metastatic lesion versus nodular hyperplasia which can occur in older cats.

INTERPRETED BY

Eric Lindquist, DMV,
DABVP, Cert. IVUSS

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The jejunal mass appears isolated; however, the hepatic nodule may represent metastatic disease. Ultrasound-guided FNA of the mass and liver nodule if accessible is indicated. Otherwise, exploratory surgery with resection and anastomosis and liver inspection and biopsy can also be considered. This is likely lymphoma. This may be medically manageable given the age of the patient. Chemoreduction or surgical resection is recommended given the obstructive pattern. Chest radiographs are recommended to assess for metastatic disease.

**IMAGING
PERFORMED BY**

Jenna Walsh, CVT

HOSPITAL NAME

Santa Clara AH

REFERRING VET

Dr. Brasted-Maki

DATE

7/7/22

Invoice
31527



PATIENT

Kit Kat Hargraves

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Spayed Female

AGE

20 years

WEIGHT

9.28 lbs

INTERPRETED BY

Eric Lindquist, DMV,
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Jenna Walsh, CVT

HOSPITAL NAME

Santa Clara AH

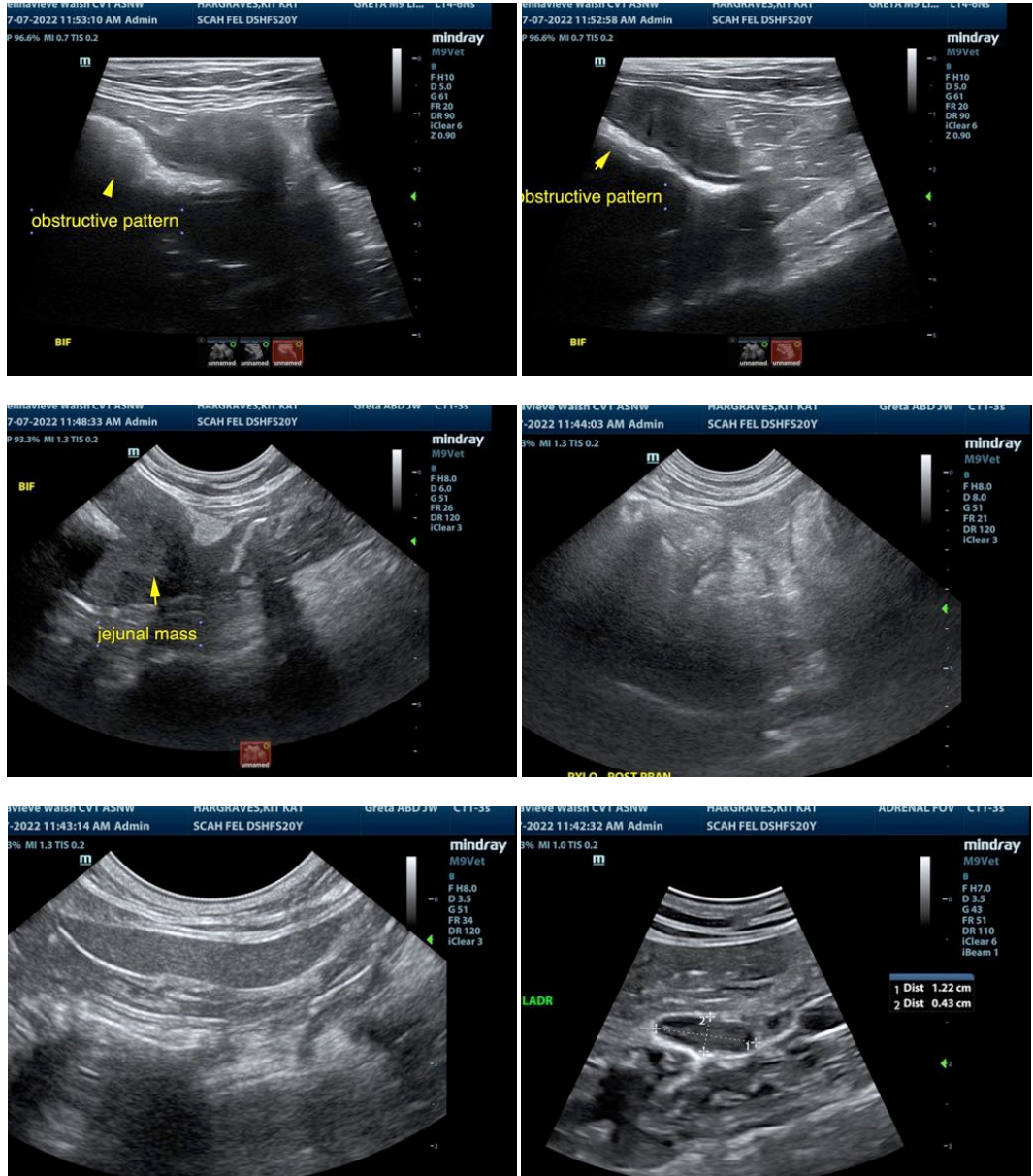
REFERRING VET

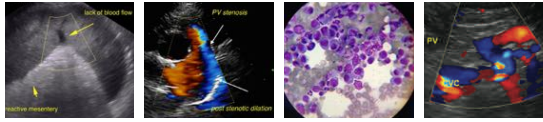
Dr. Brasted-Maki

DATE

7/7/22

Invoice
31527





PATIENT

Kit Kat Hargraves

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Spayed Female

AGE

20 years

WEIGHT

9.28 lbs

INTERPRETED BY

Eric Lindquist, DMV,
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Jenna Walsh, CVT

HOSPITAL NAME

Santa Clara AH

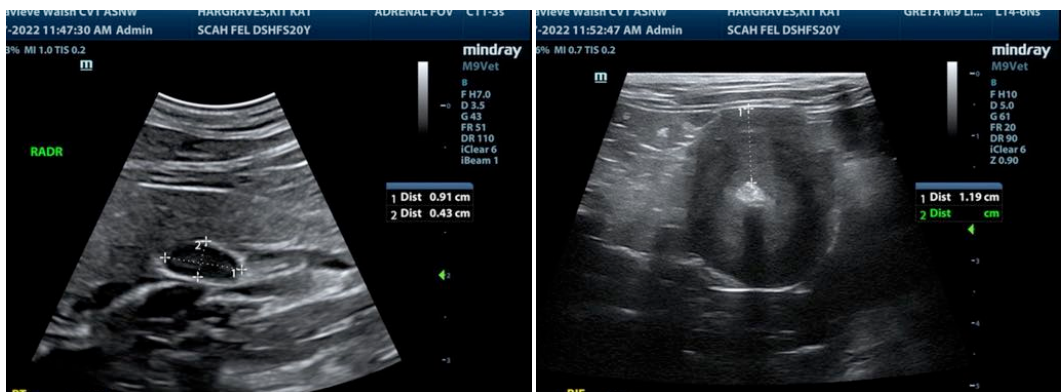
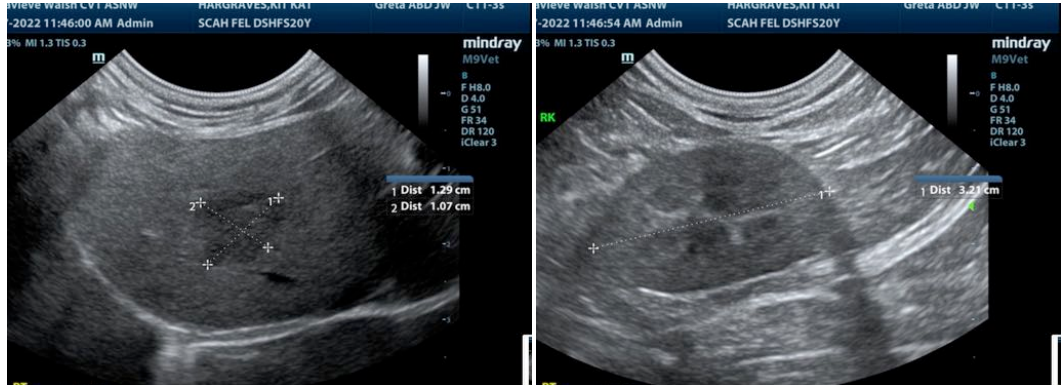
REFERRING VET

Dr. Brasted-Maki

DATE

7/7/22

Invoice
31527



The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

Thank you for this referral. If the clinical or image interpretation does not parallel your findings or if I can be of any further assistance please contact me.

Eric Lindquist, DMV, DABVP, Cert. IVUSS

CEO of SonoPath.com



PATIENT

Eric.Lindquist@SonoPath.com

Kit Kat Hargraves

SPECIES

Feline

BREED

Domestic Shorthair

SEX

Spayed Female

AGE

20 years

WEIGHT

9.28 lbs

INTERPRETED BY

Eric Lindquist, DMV,
DABVP, Cert. IVUSS

**IMAGING
PERFORMED BY**

Jenna Walsh, CVT

HOSPITAL NAME

Santa Clara AH

REFERRING VET

Dr. Brasted-Maki

DATE

7/7/22

Invoice
31527